Students from a variety of states, communities, and types of midwifery educational programs have come together this year to identify common issues that impact students across the nation. We would first like to thank the ACNM for welcoming and acting upon past concerns of the student body and recognizing student recommendations. In particular, we appreciate improvements in accessing and building relationships with preceptors, increasing access for students to conference workshops, publishing the enlightening “Top 10 List of Reasons to Hire a New Grad” in *Quickening*, and creating the Transition to Practice Taskforce. We are excited by your continuing work on these issues and hope that the recommendations below will help guide your efforts.

The four main issues identified by the midwifery student liaisons are Educational Content, Preceptorship, Funding, and Transition to Practice.

EDUCATIONAL CONTENT

In order to graduate students that are well equipped as safe and effective practitioners, midwifery education programs must be held to an extremely high standard in their provision of key content. While the core competencies established by ACNM and ACME are thoughtful and comprehensive, there are clear disparities in how various programs achieve and assess these competencies. Consequently, several essential content areas have been repeatedly identified by students as lacking in programs. The knowledge base of these students upon entry to midwifery education will be vastly different, yet each needs to graduate with an equivalent level of expertise and several topics have been found to be insufficient. First, many students feel that programs offer insufficient primary care instruction and clinical experience to prepare them to become primary care providers. Second, students are concerned with the paucity of instruction regarding pregnancy options counseling in their women’s health courses, as this is essential to our role as women’s health advocates. Third, students identified a need to have stronger pharmacology instruction integrated throughout their learning experience, as many students feel unprepared both to write prescriptions in the clinical setting and to answer pharmacology questions on our licensure examinations. Finally, students feel that program curricula needs to be reflective of the reality that students come to midwifery with a variety of labor and delivery experience and therefore have varying educational needs. We recommend continued support from the ACNM to facilitate collaboration and communication between midwifery education programs and students to ensure the consistent creation of quality, competent, and confident practitioners.

PRECEPTORSHIP
Precepting is essential to the future of midwifery. However, the current student body reports two main issues that continue to act as barriers to effective learning in the clinical setting. The first is great difficulty in locating and securing preceptors. We propose the ACNM continue to strongly encourage new midwives to become preceptors. We are asking the AMCB to include preceptor hours as part of the re-certification process as an option to remain current.

The second issue reported by students is an inconsistency between classroom education and clinical practice. In an effort to support midwives working to incorporate the most current evidence into their practices, and in return for their teaching and mentorship, we suggest the Directors of Midwifery Education work with university administrators to grant preceptors access to their affiliated health science libraries and databases.

We would like to suggest the ACNM encourage new practicing midwives to incorporate provisions in their employment contracts for making preceptorship opportunities available at their sites. This serves two purposes: protecting preceptorship opportunities for each clinical experience needed and promoting respect for the midwifery model of care. Practices that train midwifery students convey a sense of responsibility to the profession and communicate the value of educating the next generation of midwives.

FUNDING

The two main funding-related issues are: funding for midwifery programs and financial aid for student midwives. Midwifery programs struggle to meet the expenses associated with operating and expanding their programs to make midwifery education available to more people. Inadequate financial support at the national and state levels for midwifery education lead to low salaries for professors, high staff turnover, inappropriate "stop-gap" measures (such as placing midwifery students in classes designed for other professions), and program closures. We ask that the ACNM advocate for increased government funding for midwifery education programs as part of a larger effort to improve access to quality primary and reproductive healthcare.

Midwifery students are not adequately informed by the ACNM about funding sources available to help finance their educations, such as the National Health Service Corps. Recent changes in the terms and conditions of federal student loans for graduate students have significantly impacted the student community. Recognizing that many new midwives have significant outstanding student loan debt, guidance on how to navigate loan repayment following graduation would be appreciated.

TRANSITION TO PRACTICE

As a student body, we agree that transition from educational programs to practice is extremely challenging for this generation of midwives. We have identified two main points of concern related to the transition to practice: knowledge deficits and job
acquisition. First, student and new graduates continue to feel a knowledge deficit in certain topics at the time of graduation, specifically in the areas of exam preparation, contract negotiation, and interviewing skills. Second, many graduates may spend upwards of six months to a year finding employment as a midwife, during which time their clinical skills may weaken and they face the financial burdens of unemployment. Furthermore, we are concerned about the underutilization of MidwifeJobs.com, as well as other online platforms for disseminating information relevant to students. We are also concerned that employers remain unaware of the role of CMs and that MidwifeJobs.com postings continue to discriminate against CMs in states that expressly prohibit this practice. We applaud the College’s development of the student track at this year’s conference; thus far the feedback has been positive. We encourage the College to continue to foster the development of the tools necessary for transition to practice and offer the following suggestions:

- Access to educational conference session content for all students members, regardless of conference attendance;
- Establishment of a mentorship program accessible to all new grads;
- Development of a job fair at the conference with mock interviews and a panel of practicing midwives to answer questions about these issues;
- Increasing dissemination of employment opportunities;
- Continuing to explore options and modalities for residency or internship programs post-graduation; and
- Continuing to offset costs related to student attendance at the conference.

We would like to thank the College again for allowing the students to take an active part enhancing the organization that has our interest in the forefront. We are truly thankful that we belong to an organization that is cognizant of the needs of its members, including students. ACNMs willingness to work to improve the educational process and transition from student to professional has an impact on students, preceptors, and each midwifery program. We would like to thank our Student Issues Section co-chairs Kim Dau and Heather Clarke, and ACNM staff member Elaine Germano for their guidance, our fellow students for their input, our preceptors, our faculty, and the College for the opportunity to lift our voices not only for students, but for women for a lifetime.